

## Primary Health Care of Emergency Room and Maintenance System

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### DESCRIPTION

Medicine, the practice concerned with the maintenance of health and the prevention, alleviation, or cure of disease. The practice of medicine is focused on maintaining health and preventing, treating, or curing disease. There are many different types of medical practice in the curative realm. They can be conceptualized as constituting a pyramidal structure in general, with three tiers denoting increasing levels of specialization and technical sophistication while serving patient populations that are dwindling as they are eliminated from the system at lower levels. The second (advisory) and third (specialist treatment) categories, where the cost per service item rises steadily, should only be reached by patients who require specific care for diagnosis or treatment. The first level is primary care, often known as first contact care, which is where patients initially interact with the healthcare system.

The largest and most significant component of a nation's health maintenance system, primary health care is an essential component. Primary healthcare should be provided "based on practical, scientifically sound and socially acceptable methods and technology, made universally accessible to individuals and families in the community through their full participation and at a cost that the community and country can afford to maintain at every stage of their development," as stated in the Declaration of Alma-Ata. In industrialized nations, a doctor with a medical degree typically provides primary healthcare; in developing nations, first aid is sometimes given by someone without a medical degree.

At the primary level, the vast majority of patients can be completely treated. Those who are unable are directed to the second tier (secondary healthcare, or referral services) for an expert consultant's advice or for X-rays and specialized diagnostics. A local or regional hospital's technology is frequently needed for secondary health care. However, family doctors are increasingly able to access the radiographic and laboratory services that hospitals offer directly, enhancing and broadening the scope of his patient care. Institutions like teaching hospitals and units dedicated to the treatment of specific groups—women, children, people with mental problems, etc. Offer the third tier of

health care, which uses specialized services. In developing nations, where the cost of treating patients at the primary health-care level is typically only a small fraction of that at the third level and where medical costs at any level are typically covered by the government, the stark differences in the cost of treatment at the various levels are a matter of particular importance.

Doctors that practice emergency medicine stabilize and treat patients who are suffering from serious illnesses or devastating injuries. Others need to be admitted to the hospital or given more testing by other specialists, while other patients can be treated and discharged from the emergency room. Throughout the course of their shifts, emergency medicine physicians make these choices.

### What does an emergency medicine doctor do?

No matter what kind of disease or damage a patient has, emergency medicine specialists evaluate and treat them at the emergency room. Their primary goal is to stabilize patients as soon as possible and decide what the best course of action is. Men and women, adults and children, of all ages and socioeconomic backgrounds, are treated by emergency physicians.

Patients with diseases and conditions connected to neurology, cardiology, pulmonology, renal problems, gastrointestinal problems, orthopedic concerns, pregnancy, gynecology, dermatology, and psychiatry are among the many maladies they treat.

### Emergency room

The standard emergency care practices were administered to the patients in the control group. Medical personnel assisted in the patient's admission to the emergency room. A thorough medical history was obtained from the patient, and an electrocardiogram was also performed. Oxygen inhalation, blood sample collection, and Electrocardiogram (ECG) monitoring were all done at the same time. This diagnosis and completion of preoperative PCI preparation, the venous access was created, and the patient was then brought to the catheterization room for surgery.

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